

## UNITED STATES DISTRICT COURT

for the

Middle District of Georgia 

Macon Division

Dr. Husam A. Mathews  
 304 Westcliff center street  
 Warner Robins GA, 30193  
 dubbdean478@yahoo.com

Case No.

5:22-cv-397

(to be filled in by the Clerk's Office)

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Walmart inc (Headquarters are in Bentonville Arkansas) 502 BOOTH ROAD, WARNER ROBINS, GA 31088 (No. Employees, Members 501+  
 WALMART).

Jury Trial: (check one)  Yes  No

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## COMPLAINT FOR EMPLOYMENT DISCRIMINATION

## I. The Parties to This Complaint

## A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Dr. Husam A. Mathews
Street Address	304 Westcliff Center Street
City and County	Warner Robins (Houston County)
State and Zip Code	Georgia 31093
Telephone Number	478-284-2311
E-mail Address	dubbdean478@yahoo.com

## B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (*if known*). Attach additional pages if needed.

**Defendant No. 1**

Name	Damon Manning
Job or Title ( <i>if known</i> )	Store Manager
Street Address	502 Booth Road
City and County	Warner Robins (Houston County)
State and Zip Code	Georgia 31088
Telephone Number	(478) 918-0338
E-mail Address ( <i>if known</i> )	

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**Defendant No. 2**

Name	Damon Reeves
Job or Title ( <i>if known</i> )	Assistant Manager
Street Address	502 Booth Road
City and County	Warner Robins (Houston County)
State and Zip Code	Georgia 31088
Telephone Number	(478) 918-0338
E-mail Address ( <i>if known</i> )	

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**Defendant No. 3**

Name	Coach Jackson
Job or Title ( <i>if known</i> )	Coach
Street Address	502 Booth Road
City and County	Warner Robins (Houston County)
State and Zip Code	Georgia 31088
Telephone Number	(478) 918-0338
E-mail Address ( <i>if known</i> )	

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**Defendant No. 4**

Name	
Job or Title ( <i>if known</i> )	
Street Address	
City and County	
State and Zip Code	
Telephone Number	
E-mail Address ( <i>if known</i> )	

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**C. Place of Employment**

The address at which I sought employment or was employed by the defendant(s) is

Name	Walmart
Street Address	502 Booth Road
City and County	Warner Robins
State and Zip Code	Georgia 31088
Telephone Number	(478) 918-0338

**II. Basis for Jurisdiction**

This action is brought for discrimination in employment pursuant to (*check all that apply*):

- Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

*(Note: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

- Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 to 634.

*(Note: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.)*

- Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 to 12117.

*(Note: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue letter from the Equal Employment Opportunity Commission.)*

- Other federal law (*specify the federal law*):

- Relevant state law (*specify, if known*):

- Relevant city or county law (*specify, if known*):

**III. Statement of Claim**

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

**A. The discriminatory conduct of which I complain in this action includes (*check all that apply*):**

- |                                     |  |
|-------------------------------------|--|
| <input type="checkbox"/>            | Failure to hire me.  |
| <input checked="" type="checkbox"/> | Termination of my employment.  |
| <input checked="" type="checkbox"/> | Failure to promote me.   |
| <input type="checkbox"/>            | Failure to accommodate my disability.  |
| <input checked="" type="checkbox"/> | Unequal terms and conditions of my employment.   |
| <input checked="" type="checkbox"/> | Retaliation.   |
| <input type="checkbox"/>            | Other acts ( <i>specify</i> ): On this day of 3/4/2020, I was a victim of retaliation. Because Geo |

*(Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.)*

**B. It is my best recollection that the alleged discriminatory acts occurred on date(s)**

3/4/2022, March 10, 2019 (May 5, 2019 June 23, 2019 June 27, 2019 July 4, 2019 October 20, 2019 Feb 9

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**C. I believe that defendant(s) (*check one*):**

- |                                     |  |
|-------------------------------------|--|
| <input checked="" type="checkbox"/> | is/are still committing these acts against me.     |
| <input type="checkbox"/>            | is/are not still committing these acts against me. |

**D. Defendant(s) discriminated against me based on my (*check all that apply and explain*):**

- |                                     |  |   |
|-------------------------------------|--|---|
| <input checked="" type="checkbox"/> | race   | _____   |
| <input checked="" type="checkbox"/> | color  | _____   |
| <input checked="" type="checkbox"/> | gender/sex   | _____   |
| <input type="checkbox"/>            | religion   | _____   |
| <input type="checkbox"/>            | national origin  | _____   |
| <input type="checkbox"/>            | age ( <i>year of birth</i> )                                     | _____ ( <i>only when asserting a claim of age discrimination.</i> ) |
| <input type="checkbox"/>            | disability or perceived disability ( <i>specify disability</i> ) | _____   |

**E. The facts of my case are as follows. Attach additional pages if needed.**

On this day of 3/4/2020, I was a victim of retaliation. Because Georgia is an at will state, I was terminated. However, the Department of labor dismissed the employers' claim for my termination. The Hearing officer at the department of labor ruled that I was wrongfully terminated. I, Dr. Husam A. Mathews, under the jurisdiction of the Middle District court, am filing this complaint (cause of action) against Walmart.

Because I have been wrongfully terminated as a result of retaliation, the EEOC has given me the right to sue the employer. I exhibited pain and suffering, lost wages and economic hardships during the Covid 19 pandemic. and my EEOC rights were violated.

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*(Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, or the charge filed with the relevant state or city human rights division.)*

#### IV. Exhaustion of Federal Administrative Remedies

- A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding the defendant's alleged discriminatory conduct on (date)

July 2020-August 2020

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- B. The Equal Employment Opportunity Commission (check one):

has not issued a Notice of Right to Sue letter.

issued a Notice of Right to Sue letter, which I received on (date) 09/27/2022.

*(Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.)*

- C. Only litigants alleging age discrimination must answer this question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding the defendant's alleged discriminatory conduct (check one):

60 days or more have elapsed.

less than 60 days have elapsed.

#### V. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

Pro Se 7 (Rev. 12/16) Complaint for Employment Discrimination

Because I have been wrongfully terminated as a result of retaliation, the EEOC has given me the right to sue the employer. I exhibited pain and suffering, lost wages and economic hardships during the Covid 19 pandemic, and my EEOC rights were violated

Because my EEOC rights have been violated by the employer; the employer is accountable for relieving me for all of the conditions that fall under the wrongful termination and violation of EEOC laws. Because of the wrongful termination, I did not have the opportunity to advance in the company with a promotion.

I demand that the jurisdiction of the United States District Court- Middle District of Georgia hold the employer accountable for the maximum amount (\$1,000,000) associated with each violation that occurred. I also demand

## **VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### **A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing: 11/07/2022

Signature of Plaintiff



Printed Name of Plaintiff

Dr. Husam A. Mathews

### **B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney

\_\_\_\_\_

Printed Name of Attorney

\_\_\_\_\_

Bar Number

\_\_\_\_\_

Name of Law Firm

\_\_\_\_\_

Street Address

\_\_\_\_\_

State and Zip Code

\_\_\_\_\_

Telephone Number

\_\_\_\_\_

E-mail Address

\_\_\_\_\_